ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION			DATE	
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FORMALITY REVIEW		12	2/16	
RESPONSE FORMALITY REVIEW	1.7	303-883	03-13-01	
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INDEX OF CLAIMS

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If more than 150 claims or 10 actions staple additional sheet here

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